|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2020-21 BOYS BASKETBALL TEAM ROSTER / PASS LIST DO NOT HANDWRITE - MUST BE E-MAILED TO bmurray@ohsaa.org BY MARCH 10** | | | | | | | | | | |
| **A total of 24 persons are allowed on the team roster/pass list. (Fifteen uniformed players, the head coach, scorekeeper and seven others including assistant coaches, managers, trainers and statisticians).  DO NOT include anyone that will NOT be sitting on the team bench.** | | | | | | | | | | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **School**: |  |  | Division: |  | | | | | | | | | | | |
| **List the uniformed players below**. Include all information and please check names for accuracy as this information will be published in the tournament program. **Note:** If less than fifteen uniformed players are on the roster, additional individuals that will be sitting on the team bench may be added.  Enter “n/a” for the uniform numbers. | | | | | | | | | | |
|  | **Uniform Number Light Dark** | | **Player Name** | **Phonetic  Pronunciation** | | | **Position** | **Height** | **Class** |
| 1 |  |  |  |  | | |  |  |  |
| 2 |  |  |  |  | | |  |  |  |
| 3 |  |  |  |  | | |  |  |  |
| 4 |  |  |  |  | | |  |  |  |
| 5 |  |  |  |  | | |  |  |  |
| 6 |  |  |  |  | | |  |  |  |
| 7 |  |  |  |  | | |  |  |  |
| 8 |  |  |  |  | | |  |  |  |
| 9 |  |  |  |  | | |  |  |  |
| 10 |  |  |  |  | | |  |  |  |
| 11 |  |  |  |  | | |  |  |  |
| 12 |  |  |  |  | | |  |  |  |
| 13 |  |  |  |  | | |  |  |  |
| 14 |  |  |  |  | | |  |  |  |
| 15 |  |  |  |  | | |  |  |  |
| **Note:** If less than fifteen uniformed players are listed above, additional individuals that will be sitting on the team bench may be added.  Enter “n/a” for the uniform numbers**. NO MORE THAN 24 NAMES MAY BE ENTERED ON THIS FORM**. | | | | | | | | | | |
|  | **BENCH LIST** | | | | | | | | | |
|  | **List up to 8 additional individuals that will be sitting on the team bench. This includes coaching staff,  managers, trainers, team physicians and statisticians. . Include each person’s title/position.** | | | | | | | | | |
|  | **Names (Pronunciation if necessary)** | | | | **Title/Position** | | | | | |
| 16 |  | | | | **Head Coach** | | | | | |
| 17 |  | | | |  | | | | | |
| 18 |  | | | |  | | | | | |
| 19 |  | | | |  | | | | | |
| 20 |  | | | |  | | | | | |
| 21 |  | | | |  | | | | | |
| 22 |  | | | |  | | | | | |
| 23 |  | | | |  | | | | | |
|  | **Team Scorekeeper - indicate your scorekeeper below. The scorekeeper will sit at the scorer’s table** | | | | | | | | | |
| 24 |  | | | | | **Scorekeeper** | | | | |
|  | **The total number of individuals on the form may not exceed 24.** | | | | | | | | | |